

Rural Health Clinics Training Checklist

This is a training checklist designed to provide an outline for Rural Health Clinics and Provider-Based Rural Health Clinics to understand the tools available for Alabama Medicaid providers. This is not an all-inclusive document; rather a guide to assist you with obtaining information for following policy, procedures, rules and regulations for Alabama Medicaid.

Top Five denials for Independent Rural Health Clinics and Provider-Based Rural Health Clinics

Code	Explanation	Resolution
1820	Patient 1 st Claim Requires a Referral	Verify eligibility prior to rendering services. Obtain Patient 1 st referrals upon initial claims submission
1825	COBA Denial Do Not Crossover	Rural Health Clinic claims will never automatically crossover from Medicare to Medicaid, they must be filed electronically by the provider
1065	Billing Provider Name and Number Disagree	Ensure claims are being submitted with proper provider billing information as it appears on the provider file at HP
4150	BPA PC PROC Perf PROV Primary PT/PS Restriction	Refer to provider manual for billing instruction and claims filing information
1010	Performing Provider Not in Billing Group	Ensure provider performing services is enrolled and active with Alabama Medicaid.

As an enrolled Alabama Medicaid provider, you are responsible for ensuring that you and your employees or agents acting on your behalf comply with all of the requirements in the applicable provisions of State and Federal laws governing the Medicaid Program, the Alabama Medicaid Administrative Code, and the Alabama Medicaid Provider Manual as amended.

Alabama Administrative Code

Administrative Code outlines the rules and regulations for all providers. It is updated as changes are identified. Currently, the Alabama Administrative Code contains 63 chapters. The table below includes, but is not limited to important chapters for Independent Rural Health Clinics and Provider-Based Rural Health Clinics, as well as their staff.

Chapter	Overview
1 General	High level information for all providers-includes Administrative Code
2 Assuring High Quality Care	Discusses Medicaid's procedure for ensuring quality care for all recipients
3 Fair Hearings	Outlines Medicaid's procedures for fair hearing process
4 Program Integrity Division	Overview of Medicaid's Program Integrity Division
8 Independent Rural Health Clinic Services	Outlines rules and regulations Independent Rural Health Clinics must adhere to in the Alabama Medicaid program
20 Third Party	Outlines policies related to recipient's with other insurance coverage

Chapter	Overview
25 Medicaid Eligibility	General information related to recipient eligibility
26 Rules of Practice Before Agency	Outlines general rules for Medicaid
27 Confidential Materials	Information on how recipient information should be protected
28 Forms Used by Agency	Outlines forms used by the Medicaid Agency
29 Definitions of Terms Used in Rules	Outlines common definitions used in Administrative Code
30 Emergency Rule Procedures	Outlines emergency rules for the Medicaid Agency
31 Declaratory Rulings	Outlines Declaratory Rulings for the Medicaid Agency
33 Recoupments and Liens	Information on how recoupments and liens are handled
59 Provider-Based Rural Health Program	Outlines rules and regulations Provider-Based Rural Health Clinics must adhere to in the Alabama Medicaid program
60 Provider-Based Rural Health Clinic Reimbursement	Outlines rules and regulations for Provider-Based Rural Health Clinic reimbursement

Alabama Medicaid Provider Billing Manual

Provider manuals are updated quarterly (January, April, July and October). The updates are indicated in the margins of the revised chapter and on the “Quarterly Revisions” page. Updates are posted to the Alabama Medicaid website at the following link:

http://www.medicaid.alabama.gov/CONTENT/6.0_Providers/6.7_Manuals.aspx. The table below includes but is not limited to important chapters for Independent Rural Health Clinics and Provider-Based Rural Health Clinics, as well as their staff:

Chapter/Appendix	Overview
1 Introduction	How to use provider manual
2 Becoming a Medicaid Provider	How to enroll as a Medicaid Provider
3 Verifying Recipient Eligibility	How to verify recipient eligibility and how to decipher eligibility information
4 Obtaining Prior Authorization	How to obtain authorization on services which require approval prior to being furnished
5 Filing Claims	How to properly complete claim forms for submission to Alabama Medicaid
6 Receiving Reimbursement	Information on understanding your Remittance Advice
7 Understanding Your Rights and Responsibilities as a Medicaid Provider	Explains important rules and regulations providers must follow with Alabama Medicaid
32 Provider-Based Rural Health Clinics	This is one of your essential tools for information related to the Program. This chapter contains important billing information
36 Rural Health Clinics (independent)	This is one of your essential tools for information related to the Program. This chapter contains important billing information
39 Patient 1 st Billing Manual	Important information related to Patient 1 st program

Chapter/Appendix	Overview
Appendix A Well Check Check-up (EPSDT)	Important information related to well child check-up program
Appendix B Electronic Media Claims (EMC) Guidelines	Important information related to filing claims electronically
Appendix E- Medicaid Forms	Contains copies of forms required for filing requests to Medicaid and instructions for completion of the forms
Appendix F- Medicaid Internal Control Numbers (ICN)	How to read Internal Control Numbers assigned in claims processing
Appendix G- Non-Emergency Transportation (NET) Program	Explains how recipients can receive assistance getting to Medicaid covered appointments
Appendix J- Explanation of Benefit (EOB) Codes	Table of claims processing codes
Appendix K- Top 200 Third Party Liability (TPL) Carrier Codes	Contains a list of other insurance carrier codes needed for claims processing when other insurance is involved
Appendix L- Automated Voice Response System (AVRS) Quick Reference Guide	How to use Medicaid's Automated Voice Response System, a tool to check eligibility, claims status and other functions
Appendix N- Alabama Medicaid Contact Information	Provides important contact information

Tools Available for Providers at no Charge

Tool	Function
Medicaid Interactive Web Portal	Allows providers to submit a multitude of transactions and receive immediate response. Transactions include, but are not limited to: eligibility verification, claims submission, claim status, prior authorization submission and status, and Remittance Advice download
Provider Electronic Solutions Software	Provider Electronic Solutions Software (PES) allows providers to submit a multitude of transactions in batch mode and receive responses within 15 minutes-2 hours, transactions include: eligibility verification, claims submission, claim status, prior authorization submission and status
Automated Voice Response System (AVRS)	Allows providers to submit a multitude of transactions telephonically and receive fax back information, if requested, some transactions include: Eligibility verification, claims submission, procedure code pricing information

Personal Contact Information for Billing Assistance

HP is the fiscal agent for Alabama Medicaid. The following services are available through HP at no charge to Providers:

Department	Function	Contact Number
Provider Assistance Center	Assists with basic billing questions, procedure code reimbursement information and general questions	1-800-688-7989
Electronic Media	Assist providers with Provider	1-800-456-1242

Department	Function	Contact Number
Claims	Electronic Solutions, vendor related issues, electronic transmission and pharmacy-related billing issues. This unit also issues user ID's and passwords for the Agency's secure website portal	
Provider Enrollment	Assists with new provider enrollment and basic provider enrollment functions	1-888-223-3630 Option 1
Provider Re-enrollment	Assists with ongoing re-enrollment of providers	1-888-223-3630 Option 2
Provider Relations Representatives	Assists providers with in-depth billing issues and training on Provider Electronic Solutions Software, and Medicaid's Interactive Web Portal. Representatives are available for telephonic consultation, e-mail assistance or on-site training and workshops.	1-855-523-9170 Refer to Medicaid website for 7 digit extensions. Go to http://www.medicaid.alabama.gov/CONTENT/8.0_Contact/8.2.6_Provider_Representatives.aspx